

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/215,593	12/17/98	395	2764	02939-P0001A
APPLICANT	JEFFREY M. GROSS, BROOKLYN, NY; MATTHEW H. PARKER, BROOKLYN, NY.			
CONTINUING DOMESTIC DATA*** VERIFIED <u>2/21/02</u>				
371 (NAT'L STAGE) DATA*** VERIFIED <u>2/21/02</u>				
FOREIGN APPLICATIONS*** VERIFIED <u>2/21/02</u>				
FOREIGN FILING LICENSE GRANTED 01/08/99				
***** SMALL ENTITY *****				
Foreign Priority claimed 35 USC 119 (a-d) conditions met		<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWING
Verified and Acknowledged		Examiner's Initials	NY	4
TITLE		TOTAL CLAIMS		
ADDRESS		INDEPENDENT CLAIMS		
WESKEY W. WHITMYER JR. ST. ONGE STEWARD JOHNSON & REENS 986 BEDFORD STREET STAMFORD CT 06905		4		
ELECTRONIC DOCUMENT PROOFING SYSTEM				
FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	
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Bib Data Sheet

CONFIRMATION NO. 7204

SERIAL NUMBER 09/215,593	FILING DATE 12/17/1998 RULE	CLASS 707	GROUP ART UNIT 2176	ATTORNEY DOCKET NO. 02939-P0001A
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APPLICANTS

JEFFREY M. GROSS, BROOKLYN, NY;

MATTHEW H. PARKER, BROOKLYN, NY;

** CONTINUING DATA ***** None of 2/23/05

** FOREIGN APPLICATIONS ***** None of 2/23/05

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
** 01/08/1999

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 4	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS

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TITLE

ELECTRONIC DOCUMENT PROOFING SYSTEM

FILING FEE RECEIVED 437	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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